

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>TH</i>	<i>331</i>	<i>12/15</i>
O.I.P.E. CLASSIFIER	<i>112</i>	<i>45</i>	<i>12/22</i>
FORMALITY REVIEW		<i>70619</i>	<i>12/29/93</i>

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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